

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 438

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Michigan Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Mr. George Stripp

Mailing Address PO Box 575

City

Pinckney

State

MI

Zip Code

48169-0575

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ann Arbor Ceiling

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 1

Transaction ID: A5F9B7B8AEE03448B9EC

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Bruce Thelen

Mailing Address 560 Barton Shore Dr

City

Ann Arbor

State

MI

Zip Code

48105-1020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dickerson, Wright

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 7 / 2 0 1 1

Transaction ID: A9CEAC9C44C4F464DAE1

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Delano Valenti

Mailing Address 3178 Hedgewood Ln

City

Rochester Hills

State

MI

Zip Code

48309-4509

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Insurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 1 1

Transaction ID: AD90FE0195BD440D78A1

Amount of Each Receipt this Period

450.00

**SUBTOTAL** of Receipts This Page (optional) .....

950.00

**TOTAL** This Period (last page this line number only) .....